

**ADDENDUM #1  
TO SPEC. 05-044**

**ANNUAL REQUIREMENTS FOR  
WASTE APPLIANCE AND METAL RECYCLING SERVICES**

Addendum #1 to Spec. 05-044 for Annual Requirements for Waste Appliance and Metal Recycling Services originally to be opened on Wednesday, February 23, 2005 at 12:00 noon.

**The following is a form that should be added to Specification 05-044:**

**City of Lincoln - Monthly Waste Appliance Certification**

All other terms and conditions to remain unchanged.

Dated this first (1) day of February 2005.

Purchasing Department

Tom Kopplin  
Assistant Purchasing Agent

**CITY OF LINCOLN  
MONTHLY WASTE APPLIANCE CERTIFICATION**

Report Month / Year

Contractor Name

Contact Person

Phone

Number of refrigerant containing units received: \_\_\_\_\_ Units

Number of non-refrigerant containing units received: \_\_\_\_\_ Units

**REFRIGERANTS**

Number of units processed for refrigerant recovery: \_\_\_\_\_ Units

Name of Contractor's representative  
certified to recover refrigerants

Name and Model of certified  
recovery equipment used

Were refrigerants ( ) stored at business, or ( ) recycled?

If refrigerants were recycled during period, indicate the following:

Recycling Company Name

Contact Person

Street

City

State

Zip

Phone

**PCB CONTAINING ITEMS**

PCB containing items removed during period: Number of items \_\_\_\_\_; Weight \_\_\_\_\_ lbs.

Were PCB containing items ( ) stored at business, or ( ) disposed?

If PCB containing items were disposed during period, indicate the following:

Disposal / Treatment Company Name

Contact Person

Street

City

State

Zip

Phone

Disposal or Treatment Method

Transporter Name

Quantity Shipped (lbs.)

**COMPRESSOR LUBRICANTS**

Were compressor lubricants ( ) stored at business, ( ) recycled, or ( ) disposed?

If compressor lubricants were recycled or disposed during period, indicate the following:

Recycler or Disposal Site Name

Contact Person

Street

City

State

Zip

Phone

I hereby certify the above information is accurate and work performed for the City of Lincoln was in accordance to the applicable contract requirements and applicable Federal and State regulations.

Authorized Signature

Print Name

Title

Phone